

CLAIMS ONLY

Application Number

" Filling" Date

101630,837

Applicant(s)

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1	1					
2						
3						
4						
5						
6						
7						
8						
9	1					
10	1					
11						
12						
13						
14						
15						
16						
17	1					
18	1					
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45						
46						
47						
48						
49						
50						
Total Indep	5					
Total Depend	26					
Total Claims	31					

May be used for additional claims or amendments

	Indep	Depend	Indep	Depend	Indep	Depend
51						
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100						
Total Indep						
Total Depend						
Total Claims						